



Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Proposed Work Site at: 135 Van Zile Rd Big Lots

2. Name of Owner in Fee: Bricktown Plaza Associates

Tel. (516) 393-9000 e-mail jgalanis@polimeni.com

Address 600 Old Country Rd, Ste 425 Garden City, NY 11530
street municipality zip code

3. Ownership in Fee: Public _____ Private X

4. Principal Contractor: Trademark Sign LLC Tel. (732) 288-1004

Address 631 Herman Rd e-mail sue@trademarksignllc.c
Jackson, NJ 08527

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 452779494 FAX: (732) 481-2821

5. Architect or Engineer Murdoch Engineering Contact Jerem

Address 2 Hummingbird Ct, Howell, NJ 07731 e-mail jerem@murdochengineeringi

Tel. (973) 570-8215 FAX: _____

6. Responsible Person in Charge once Work has Begun Susan Rolls ✓

Tel. (732) 288-1004 FAX: (732) 481-2821

V. FEE SUMMARY (for office use only)		Update	Update
1. Building	\$ 150666		
2. Electrical	1507		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	5-		
10. Subtotal	75		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ 380-		

VI. BUILDING/SITE CHARACTERISTICS		(office use only)
1. Number of Stories _____		_____
2. Height of Structure _____ ft.		_____
3. Area — Largest Floor _____ sq. ft.		_____
4. New Building Area _____ sq. ft.		_____
5. Volume of New Structure _____ cu. ft.		_____
6. Max. Live Load _____		_____
7. Max. Occupancy Load _____		_____
8. If Industrialized Building: State Approved _____ HUD _____		_____
9. Total Land Area Disturbed _____ sq. ft.		_____
10. Flood Hazard Zone _____		_____
11. Base Flood Elevation _____ ft.		_____
12. Wetlands yes _____ no _____		_____

Ila. PROPOSED WORK		☐ Minor Work ☐ New Building ☐ Addition ☐ Demolition ☐ Repair ☐ Alteration ☒ Renovation ☐ Reconstruction ☐ Asbestos Abat. -Subch. 8 ☐ Lead Hazard Abatement ☐ Radon Remediation ☐ Annual Permit							
Iib. SUBCODES (Check all that apply)		FOR OFFICE USE ONLY (Optional)							
	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates		Re-viewer
☒ Building	2,000				08/09/18	KEC			
☒ Electrical	300				7/31/18	PJ			
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST					7/25/18	ECC			

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: Select Group _____

3. Change in Use Group, Indicate Present: Select Group _____

4. No. of dwelling units: Total Units Income-restricted

Gained, Sale	_____
Gained, Rental	_____
Lost, Sale	_____
Lost, Rental	_____

B. NON-RESIDENTIAL (primary use)

1. State Specific Use: _____

2. Use Group, Proposed: Select Group _____

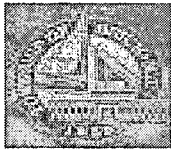
3. Change in Use Group, Indicate Present: Select Group _____

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____

Proposed _____

III. PLAN REVIEW (optional)		IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?		Proposed _____
DO YOU WANT: 1. ☐ Partial Releases 2. ☐ Prototype Processing		1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks 2. ☐ High Pressure Boilers 3. ☐ Pressure Vessels 4. ☐ Refrigeration Systems 5. ☐ Cross-Connections/Backflow Preventers 6. ☐ Hazardous Uses/Places of Assembly 7. ☐ Sprinklers/Standpipes 8. ☐ Smoke Control Systems in Open Wells 9. ☐ Underground Storage Tanks 10. ☐ Swimming Pools, Spas and Hot Tubs 11. ☐ LP Gas Tanks 12. ☐ Fire Alarm		



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 9/20/2018
Control Number C-18-002682
Permit Number 18-2265
Permit Issue Date 8/16/2018
Certificate Number 18-2265

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 135 VAN ZILE RD. BIG LOTS Brick Township, NJ Block: 1149 Lot: 1 Qual: _____

Owner in Fee: BRICKTOWN PLAZA ASSOCIATES

Owner Address: 600 OLD COUNTRY RD #425 GARDEN CITY NY 11530

Telephone: (516) 393-9000

Contractor: Trademark Sign LLC

Address: 375 FARADAY AVE JACKSON NJ 08527

Telephone: (732) 288-1004 Fax: _____

License Number or Builders Registration Number: _____ Federal Emp. Number: 45-2779494

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: SIGN INSTALLATION - - BIG LOTS ...FACADE SIGN

Certificate Comments:

☐ **Certificate of Occupancy**

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☒ **Certificate of Approval**

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ **Certificate of Continued Occupancy**

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

Construction Official

Date Printed: 9/20/2018

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

- A. ☐ I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

- B. ☐ I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(f)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

- C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

- D. ☐ I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

(X) Check if contractor.

Agent Name Susan Rolis

Address 631 Herman Rd

Jackson, NJ 08527

Telephone (732) 288-1004

Signature _____

III. ☐ LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.



ELECTRICAL SUBCODE TECHNICAL SECTION



"BIG LOTS"

Date Received
Control #
Date Issued
Permit #

8/16/18

18-2265

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 1149 Lot 1 Qualification Code _____

Work Site Location Big Lots

135 Van Zile Rd, Brick, NJ 08724

Owner in Fee: Bricktown Plaza Associates

Tel. (516) 393-9000 e-mail jgalanis@polimenic.com

Address 6000 Old Country Rd #425, Garden City, NY 11530

Contractor: S.S. Electric Tel. (732) 904-6427

Address 63 Logansberry Lane e-mail _____

T.R. NJ 08753

Contractor License No. 11413 Exp. Date 3/31/21

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. 146-72-5038 FAX: (_____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

[] Pole/Pad # _____ [] Temporary [] Other _____

Building Occupied as Commercial Utility Co. _____

Est. Cost of Elec. Work \$ 300-

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Failure	Approval Initial
[] No Plans Required		Rough			
[] Partial Underslab Utilities Approved		Barrier-Free			
Date: _____ Approved by: _____		Trench			
[x] Electric Plans Approved		Temp. Serv.			
Date: <u>9/19/18</u> Approved by: <u>RJ</u>		Constr. Serv.			
Joint Plan Review Required:		TCO			
[] Bldg. [] Plumb. [] Fire. [] Elev.		Other			
SUBCODE APPROVAL for PERMIT		Service			
Date: <u>9/19/18</u>		Final			<u>9/19/18 RJ</u>
Approved by: _____		Barrier-Free			
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card	Date Issued		
[] CO [] CCO [] CA		Final Cut-in-Card	Date Issued		
Date: <u>9/19/18</u>		Annual Pool Inspection			
Approved by: _____		Date of Grounding and Bonding			
		Certification			

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Scott H. Simon

[x] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr. [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

connect new sign to existing circuit

QTY.	SIZE	ITEMS
_____	_____	Lighting Fixtures
_____	_____	Receptacles
_____	_____	Switches
_____	_____	Detectors
_____	_____	Light Poles
_____	_____	Motors—Fract. HP
_____	_____	Emergency & Exit Lights
_____	_____	Communications Points
_____	_____	Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

_____	Pool Permit/with UW Lights
_____	Storable Pool/Spa/Hot Tub
_____	KW Elec. Range/Receptacle
_____	KW Oven/Surface Unit
_____	KW Elec. Water Heater
_____	KW Elec. Dryer/Receptacle
_____	KW Dishwasher
_____	HP Garbage Disposal
_____	KW Central A/C Unit
_____	HP/KW Space Heater/Air Handler
_____	KW Baseboard Heat
_____	HP Motors 1/+ HP
_____	KW Transformer/Generator
_____	AMP Service
_____	AMP Subpanels
_____	AMP Motor Control Center
<u>1</u>	KW Elec. Sign/Outline Light <u>LED</u>

FEE (Office Use Only)

COMMERCIAL

Administrative Surcharge	\$ _____
Minimum Fee	\$ _____
State Permit Surcharge Fee	\$ _____
TOTAL FEE	\$ _____



BUILDING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

8/16/18
18-2265

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 1149 Lot 1 Qualification Code _____

Work Site Location Big Lots
135 Van Zile Rd, Brick, NJ 08724

Owner in Fee: Bricktown Plaza Associates

Tel. (516) 393-9000 e-mail jgalanis@polimeni.com

Address 600 Old Country Rd, Ste 425 Garden City, NY 11530

Contractor: Trademark Sign LLC Tel. (732) 288-1004

Address 631 Herman Rd e-mail sue@trademarksignllc.com

Jackson, NJ 08527

Contractor License No. or Builder Registration No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 452779494 FAX: (732) 481-2821

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Sign here: [Signature]

Print name here: Susan Rolls

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Replace storefront sign with new LED storefront sign for Big Lots as per drawings.

TYPE OF WORK:

- ☐ New Building
☐ Addition
☐ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☒ Sign 131.3 Sq. Ft.
☐ Pool
☐ Retaining Wall _____ Sq. Ft.
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Radon Remediation
☐ Other _____
☐ Demolition

FEE (Office Use Only)

COMMERCIAL

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☐ No Plans Required	<u>08/09/18</u>	<u>WCK</u>	Type:	Failure	Approval
☒ All			Footings/Foundations		
☐ Footings/Foundations			Footings/Foundations		
☐ Structural/Framework			Foundation		
☐ Exterior			Slab		
☐ Interior			Frame		
Joint Plan Review Required:			Truss Sys./Bracing		
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Barrier-Free		
SUBCODE APPROVAL for PERMIT	<u>08/09/18</u>	<u>WCK</u>	Insulation		
Date:			Finishes -Base Layer		
Approved by:			Finishes -Final		
SUBCODE APPROVAL for CERTIFICATE			Energy		
☐ CO ☐ CCO ☒ CA	<u>08/16/18</u>	<u>WCK</u>	Mechanical		
Date:			TCO		
Approved by:			Other		
			Final	<u>08/16/18</u>	<u>WCK</u>
			Barrier-Free		

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Constr. Class Present _____ Proposed _____
No. of Stories _____ If Industrialized Building:
Height of Structure _____ ft. State Approved _____ HUD _____
Area — Largest Floor _____ sq. ft. Est. Cost of Bldg. Work:
New Bldg. Area/All Floors _____ sq. ft. 1. New Bldg. \$ _____
Volume of New Structure _____ cu. ft. 2. Rehabilitation \$ 2,000
Max. Live Load _____ 3. Total (1+ 2) \$ 2,000
Max. Occupancy Load _____



CONSTRUCTION PERMIT

Date Issued 8/16/18
Control # C-18-002682
Permit # 18-2265

IDENTIFICATION Block: 1149 Lot: 1 Qualifier _____
Work Site Location: 135 VAN ZILE RD. BIG LOTS Brick Township, NJ Contractor Trademark Sign LLC
Address 375 FARADAY AVE JACKSON NJ 08527
Owner in Fee BRICKTOWN PLAZA ASSOCIATES
600 OLD COUNTRY RD #425 GARDEN CITY NY Telephone: (732) 288-1004
11530 Lic. No. or Bldrs. Reg. No. _____
Telephone: (516) 393-9000 Federal Employee No. 45-2779494

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT (Subchapter 8 only) ☐ OTHER

DESCRIPTION OF WORK:

SIGN INSTALLATION - BIG LOTS ... FACADE SIGN

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$2,300

D. Neumann
Construction Official

8/13/18
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

08/16/18 11:57 AM 0115000718
0003 SERV. 004

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☒ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

PAYMENTS (Office Use Only)	
Building	\$150
Electrical	\$150
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$5
CO Fee	
Other	\$0
Total	\$305
Check No.	<u>11181</u>
Cash	\$0
Credit	\$0
Collected By	<u>Cew</u>

1175
380

RECEIVING CLERK _____
DATE REC'D _____

ZONING PERMIT APPLICATION

PERMIT # ZP-12-00919
DATE ISSUED 8/16/18

BLOCK: 1149 LOT: 1 QUALIFIER: _____ SITE ADDRESS: 135 Van Zile Rd

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Bricktown Plaza Associates
COMPLETE ADDRESS: 600 Old Country Rd, Ste 425, Garden City, NY 11530
PHONE # 516-393-9771 EMAIL: jgalanis@polmeni.com

2. NAME OF APPLICANT: Susan Rolls
APPLICANT ADDRESS: 631 Herman Rd, Jackson, NJ 08527
PHONE # 732-288-1004 x 101 EMAIL: sue@trademarksignllc.com

3. RESPONSIBLE PERSON FOR WORK: Susan Rolls
PHONE# 732-288-1004 x 101 FAX# 732-481-2821

4. SIGNATURE OF APPLICANT: 

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: \$ 75
OTHER: \$ _____
TOTAL: \$ 75

REQUIRED BY APPLICANT

RESIDENTIAL: _____
COMMERCIAL: x
EXISTING USE: Big Lots
PROPOSED USE Big Lots

BOARD APPROVAL: _____ PB _____ ZB _____
RESOLUTION#: _____
APPROVAL DATE: _____

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: _____ *ADDITION _____ *ALTERATION x *PORCH _____ *DECK _____

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____

HEIGHT: _____ (*APPLICABLE)

OTHER Sign

DESCRIPTION: Replace existing storefront sign with like sign: new LED storefront sign: Overall 13.5833' L x 9.6667' Ht

ZONING REVIEW:

DATE REVIEWED: 7-24-18 DATE DENIED: _____ DATE APPROVED: 7-24-18 INTLS: 

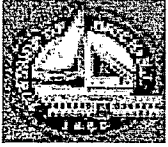
(SEE BACK PAGE)

OFFICE USE ONLY

ZONING REVIEW:

DATE REVIEWED: 7/20/18 DATE DENIED: DATE APPROVED: 7/20/18 INTLS: W/20

[illegible]



Brick Township
401 Chambers Bridge Rd.
Brick, NJ 08723
(732) 262-1336

Date Issued:
Application Number:
Application Date:
Project Number:
Permit Number:
Fee:

8/16/18
ZA-18-00885
7/20/2018
ZP-18-00919
\$75.00

Zoning Permit

Worksite **135-197 VAN ZILE RD.**
Location: **Brick Township, NJ 08724**

Owner: **BRICKTOWN PLAZA ASSOCIATES**
Address: **600 OLD COUNTRY RD #425**
GARDEN CITY, NJ 11530

Applicant: **Susan Rolls**
Address: **631 Herman Rd.**
Jackson, NJ 08527

Block: 1149 Lot: 1 Qualifier: _____ Zone: B-3

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Present Use: Retail Store

☐ Non Conforming Use

☐ Non Conforming Structure

Proposed Use: Retail Store (Big Lots)

Work Description:

Sign - Replace existing storefront sign with new 117 sq. ft. LED storefront sign for "Big Lots".

The sign cannot exceed 15% of the storefront facade.

Additional Zoning Permit is required for additional work and signage.

Application Approved Date: 7/24/2018

Upon review it was determined that the Zoning Permit:

☒ Permitted by Ordinance

☐ Permitted by Variance approved on: _____

☐ Approved with Conditions

☐ Valid Nonconforming Use/Structure is established by

☐ Zoning Board of Adjustment

☐ Zoning Officer

Christopher J. Romano, Assistant Zoning Officer

7/24/2018

Date

Sean Kinnevy, Zoning Officer

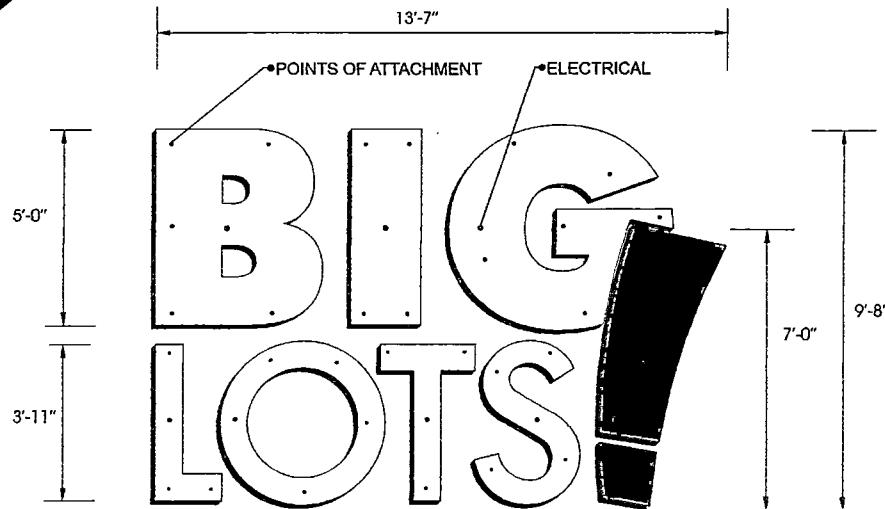
7/20/18

Date

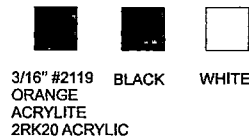
LOCATION: BRICKTOWN, NJ

TITLE: BIG LOTS #

SIGN VISION CO.



COLOR SPECIFICATIONS

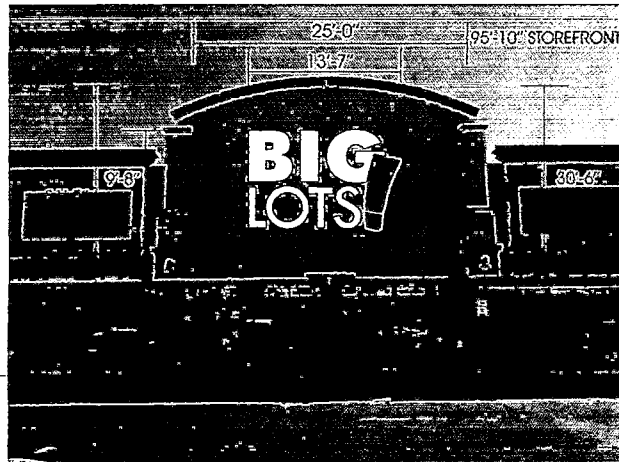


ELECTRICAL CHARACTERISTICS
120 VOLT PER SET
4 AMPS

ELECTRICAL ACCESS
MUST BE BROUGHT WITH IN
3 FEET BY LICENSED
ELECTRICIAN

SIGN SPECIFICATIONS:

- FASCIA** CORRUGATED METAL OVER OVER 3/4" PLYWOOD
- LETTERS**
 - ☐ .063 X 5" CHanneled RETURNS
 - ☐ .063 ALUMINUM LETTER BACKS
 - ☐ FINISHED BLACK OUTSIDE
 - ☐ FINISHED WHITE INSIDE
- FACES**
 - ☐ 3/16" #7328 WHITE ACRYLITE WRT30 ACRYLIC
 - ☐ 1" BLACK JEWELITE TRIM CAP RETAINERS
- ILLUMINATION**
 - ☐ PRISM WHITE LED MODULES
 - ☐ PHILIPS ADVANCE LED DRIVER
INSTALLED REMOTE BEHIND WALL
IN WATERPROOF BOX
 - ☐ WIRING and FIXTURES: UL LISTED/RECOGNIZE
HARDWARE
 - ☐ 12 FOOT ELECTRICAL WHIP
- NOTE:**
 - ☐ FABRICATION AND INSTALLATION PER UL
SPECIFICATIONS.
 - ☐ INSTALL IN ACCORDANCE WITH THE NEC.
 - ☐ ALL SIGN EQUIPT WITH DISCONNECT SWITCHES.
- INSTALLATION**
 - ☐ ALL SIGNAGE TO BE FLUSH MOUNTED
 - ☐ 1/4" X 4" LONG TAP CON FASTENERS
 - ☐ PHOTO CELL INSTALLED REMOTE BY ELECTRICIAN.
- EXCLAMATION**
 - ☐ .063 X 5" CHanneled RETURNS
 - ☐ .063 ALUMINUM LETTER BACKS
 - ☐ FINISHED BLACK OUTSIDE
 - ☐ FINISHED WHITE INSIDE
- FACE**
 - ☐ 3/16" #2119 ORANGE ACRYLITE 2RK20 ACRYLIC
 - ☐ 1" BLACK JEWELITE TRIM CAP RETAINERS
- ILLUMINATION**
 - ☐ PRISM WHITE LED MODULES
 - ☐ PHILIPS ADVANCE LED DRIVER
INSTALLED REMOTE BEHIND WALL
IN WATERPROOF BOX
 - ☐ WIRING and FIXTURES: UL LISTED/RECOGNIZE
HARDWARE
 - ☐ 12 FOOT ELECTRICAL WHIP



REMOVE EXISTING 5/3'-11" STACKED X 13'-7" LETTER SET
INSTALL NEW EXISTING 5/3'-11" STACKED X 13'-7" LETTER SET



Zoning Review

Approval

By: an Sign
Date: 7-24-18

YOUR SIGNATURE REPRESENTS FINAL APPROVAL. PLEASE LOOK OVER CAREFULLY. CHECK ALL SPELLING AND GRAMMAR. SIGN VISION CAN NOT BE RESPONSIBLE FOR ANY ERRORS AFTER FINAL APPROVAL.



CORPORATE OFFICES:
987 CLAYCRAFT ROAD
COLUMBUS, OHIO 43230
PHONE: (614) 475-5161

JOB TITLE:
BIG LOTS #1955
131 VAN ALLEN ROAD
BRICKTOWN, NJ

DATE: MAY 12, 2018
SALESMAN: DARRIN GRAY
DESIGNER: SANDI DANIEL
DRAWING #: 2018-123

FILE #: 18-18129
REVISION:
REVISION:
REVISION:

APPROVED ☐
APPROVED WITH CORRECTIONS ☐
NOT APPROVED FOR RESUBMIT ☐
SIGNATURE: _____

Legend

📍 135 Van Zile Rd



Google Earth

©2018 Google

1000 ft



631 HERMAN RD
JACKSON, NJ, 08527
732-288-1004

RECEIVED
JUL 17 2010
BUILDING

To whom it may concern:

Enclosed are the required construction, building, electrical, and zoning permit applications for the proposed Big Lots signage. Previous engineered drawings have been replaced with sealed and signed plans as required. If there are any questions or additional information required please do not hesitate to call me directly.

Thank you,

Susan Rolls

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 1149 LOT: 1 ADDRESS: 135 Van Zile Rd**IDENTIFICATION:**

1. WORK SITE ADDRESS: 135 Van Zile Rd
2. NAME OF OWNER IN FEE: Bricktown Plaza Associates
ADDRESS: 600 Old Country Rd Ste 425 PHONE #: (816) 393-9771
Garden City, NY 11530 FAX #: ()
3. PRINCIPAL CONTRACTOR: Trademark Sign LLC
ADDRESS: 631 Herman Rd PHONE #: (732) 288-1004 x101
Jackson, NJ 08527 FAX #: (732) 481-2821
4. ARCHITECT OR ENGINEER: Murdoch Engineering
ADDRESS: 2 Hummingbird Ct PHONE: # (908) 570-8215
5. RESPONSIBLE PERSON FOR WORK: Susan Ralls
ADDRESS: 631 Herman Rd, Jackson, NJ 08527
PHONE #: (732) 288-1004 FAX #: (732) 481-2821 E-MAIL: Sue@trademarksignllc.com

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING
☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL
☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☒ OTHER Sign

LENGTH: 13.583' WIDTH: 0.417' HEIGHT: 9.667'

FEE SUMMARY:

APPLICATION FEE: \$ _____
REVIEW FEE: \$ _____
INSPECTION FEE: \$ _____
OTHER _____: \$ _____
BOND(S): \$ _____
TOTAL: \$ _____

SPECIAL CONDITIONS:

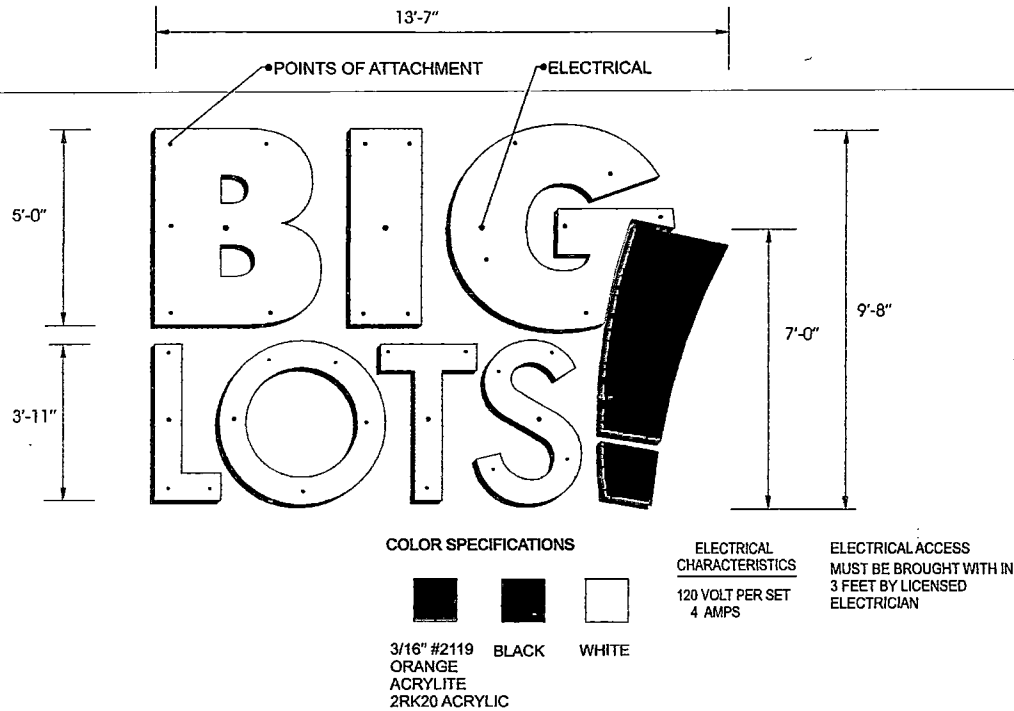
OCEAN COUNTY SOILS: _____
DRAINAGE EASEMENTS: _____
UTILITY EASEMENTS: _____
CONSERVATION EASEMENTS: _____
FEMA REQUIREMENTS: _____
D.E.P. PERMITS: _____
BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____



SIGN SPECIFICATIONS:

FASCIA CORRUGATED METAL OVER
OVER 3/4" PLYWOOD

LETTERS

- ☐ .063 X 5" CHanneled RETURNS
- ☐ .063 ALUMINUM LETTER BACKS
- ☐ FINISHED BLACK OUTSIDE
- ☐ FINISHED WHITE INSIDE

FACES

- ☐ 3/16" #7328 WHITE ACRYLITE WRT30 ACRYLIC
- ☐ 1" BLACK JEWELITE TRIM CAP RETAINERS

ILLUMINATION

- ☐ PRISM WHITE LED MODULES
- ☐ PHILIPS ADVANCE LED DRIVER
INSTALLED REMOTE BEHIND WALL
IN WATERPROOF BOX
- ☐ WIRING and FIXTURES: UL LISTED/RECOGNIZE
HARDWARE
- ☐ 12 FOOT ELECTRICAL WHIP

NOTE:

- ☐ FABRICATION AND INSTALLATION PER UL
SPECIFICATIONS.
- ☐ INSTALL IN ACCORDANCE WITH THE NEC.
- ☐ ALL SIGN EQUIPT WITH DISCONNECT SWITCHES.

INSTALLATION

- ☐ ALL SIGNAGE TO BE FLUSH MOUNTED
- ☐ 1/4" X 4" LONG TAP CON FASTENERS

- ☐ PHOTO CELL INSTALLED REMOTE BY ELECTRICIAN.

EXCLAMATION

- ☐ .063 X 5" CHanneled RETURNS
- ☐ .063 ALUMINUM LETTER BACKS
- ☐ FINISHED BLACK OUTSIDE
- ☐ FINISHED WHITE INSIDE

FACE

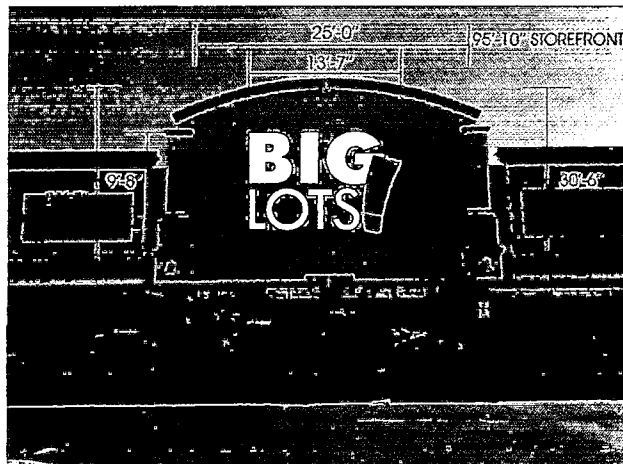
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Zoning Review
Approval

By: an sign
Date: 7-24-18



REMOVE EXISTING 5/3'-11" STACKED X 13'-7" LETTER SET
INSTALL NEW EXISTING 5/3'-11" STACKED X 13'-7" LETTER SET



CORPORATE OFFICES:
987 CLAYCRAFT ROAD
COLUMBUS, OHIO 43230
PHONE: (614) 475-5161

JOB TITLE:
BIG LOTS #195
131 VAN ALLE ROAD
BRICKTOWN, NJ

DATE: MAY 12, 2018
SALESMAN: DARIN GRAY
DESIGNER: SANDI DANIEL
DRAWING #2018-129

FILE: BL 18129
REVISION:
REVISION:
REVISION:

APPROVED ☐
NOT APPROVED WITH CORRECTIONS ☐
NOT APPROVED RESUBMIT ☐
SIGNATURE:

ots

an

Legend

📍 135 Van Zile Rd

135 Van Zile Rd

88

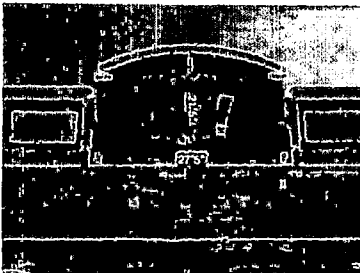
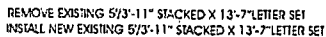


1000 ft

Google Earth

©2013 Google

TITLE: BIG LOYS #
SIGN VISION CO.



5"

FASCIA CORRUGATED METAL OVER 3/4" PLYWOOD

LETTERS

- ☐ .063 X 5" CHANNELED RETURNS
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PHILIPS ADVANCE LED DRIVER
INSTALLED REMOTE BEHIND WALL IN WATERPROOF BOX

WIRING AND FIXTURES: UL LISTED/RECOGNIZE HARDWARE

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EXPLANATION

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FACE

- ☐ 3/16" #2119 ORANGE ACRYLITE 2R2X20 ACRYLIC
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ILLUMINATION

- ☐ PRISM WHITE LED MODULES

PHILIPS ADVANCE LED DRIVER
INSTALLED REMOTE BEHIND WALL IN WATERPROOF BOX

WIRING AND FIXTURES: UL LISTED/RECOGNIZE HARDWARE

- ☐ 12 FOOT ELECTRICAL WHIP

YOUR STUDENT'S EFFICIENT USE OF APTONAL MUST LOCK OVER CAREFUL CHECK ALL STUDENTS AND GRADUATE STUDENTS CAN NOT LEAVE WITHOUT A GRADUATE STUDENT AFTER FINAL APPROVAL



CORPORATE OFFICES:
387 CLAYCRAFT ROAD
COLUMBUS, OH 43223
PHONE: (614) 475-5161

131 VAN DYKE ROAD
BROOKLYN, NY

DATE MAY 12, 2015
SALES TAX DATED:
DEBORAH SANDOZ
DRAWING #2015-179

REVISION
REVISION
REVISION

APPROVED
NOT APPROVED

Approved by Styleline Management for
Landlord

X James D. Hertz

6-75-18